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Bib Data Sheet

CONFIRMATION NO. 4191

|                             |                                       |              |                        |                        |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------|
| SERIAL NUMBER<br>10/716,018 | FILING DATE<br>11/18/2003<br><br>RULE | CLASS<br>156 | GROUP ART UNIT<br>1734 | ATTORNEY DOCKET<br>NO. |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------|

## APPLICANTS

Robert P. Schoppman, Brandon, FL;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/586,292 06/02/2000 ABN  
 which claims benefit of 60/138,142 06/08/1999

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/13/2004

\*\* SMALL ENTITY \*\*

|   |                           |                         |                       |                            |
|---|---------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR<br>COUNTRY<br>FL | SHEETS<br>DRAWING<br>10 | TOTAL<br>CLAIMS<br>12 | INDEPENDENT<br>CLAIMS<br>4 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                           |                         |                       |                            |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____  |                           |                         |                       |                            |

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## TITLE

Apparatus and method for transferring a template

|                                   |   |   |
|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>428 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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